CITY OF ESTELL MANOR
ZONING PERMIT APPLICATION
Fee: $20

DATE_____ APPLICATION #_____

OWNER NAME_____

OWNERADDRESS:_____

CONTRACTOR NAME & PHONE
NUMBER_____
_____

OWNER MAILING ADDRESS IF DIFFERENT THAN WORK LOCATION:

_____

_____

PHONE NUMBER_____
BLOCK_____ LOT_____ ZONING
DISTRICT_____ ACREAGE OF
PROPERTY_____

DESCRIPTION OF PROPOSED DEVELOPMENT

_____

_____

NAME OF PROPERTY OWNER OR AUTHORIZED
APPLICANT_____

PHONE NUMBER OF PROPERTY OWNER OR AUTHORIZED
APPLICANT_____

ATTACH PLOT PLAN SKETCH SHOWING LOCATION OF ALL BUILDINGS AND SETBACKS FROM PROPERTY LINES.